National Institute of Environmental Health Sciences

U.S. Funding is insufficient to address the human health impacts of and public health responses to climate variability and change

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Abstract:

BACKGROUND: The need to identify and try to prevent adverse health impacts of climate change has risen to the forefront of climate change policy debates and become a top priority of the public health community. Given the observed and projected changes in climate and weather patterns, their current and anticipated health impacts, and the significant degree of regulatory discussion underway in the U.S. government, it is reasonable to determine the extent of federal investment in research to understand, avoid, prepare for, and respond to the human health impacts of climate change in the United States. OBJECTIVE: In this commentary we summarize the health risks of climate change in the United States and examine the extent of federal funding devoted to understanding, avoiding, preparing for, and responding to the human health risks of climate change. DISCUSSION: Future climate change is projected to exacerbate various current health problems, including heat-related mortality, diarrheal diseases, and diseases associated with exposure to ozone and aeroallergens. Demographic trends and geophysical and socioeconomic factors could increase overall vulnerability. Despite these risks, extramural federal funding of climate change and health research is estimated to be < $3 million per year. CONCLUSIONS: Given the real risks that climate change poses for U.S. populations, the National Institutes of Health, Centers for Disease Control and Prevention, U.S. Environmental Protection Agency, and other agencies need to have robust intramural and extramural programs, with funding of > $200 million annually. Oversight of the size and priorities of these programs could be provided by a standing committee within the National Academy of Sciences.

Source: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2702397

Resource Description

Early Warning System: ☒

resource focus on systems used to warn populations of high temperatures, extreme weather, or other elements of climate change to prevent harm to health

A focus of content

Exposure : ☒

weather or climate related pathway by which climate change affects health

Air Pollution, Extreme Weather Event, Food/Water Security, Food/Water Security, Human Conflict/Displacement, Precipitation, Solar Radiation, Temperature

Air Pollution: Allergens, Interaction with Temperature, Ozone

Temperature: Extreme Heat

Geographic Feature: ☑

resource focuses on specific type of geography

None or Unspecified

Geographic Location: ☑

resource focuses on specific location

United States

Health Co-Benefit/Co–Harm (Adaption/Mitigation): ☑

specification of beneficial or harmful impacts to health resulting from efforts to reduce or cope with greenhouse gases

A focus of content

Health Impact: ☑

specification of health effect or disease related to climate change exposure

Infectious Disease, Injury, Mental Health/Stress, Morbidity/Mortality, Respiratory Effect, Other Health Impact

Infectious Disease: Foodborne/Waterborne Disease, Vectorborne Disease, Zoonotic Disease

Other Health Impact: heat related illness

Mitigation/Adaptation: ☑

mitigation or adaptation strategy is a focus of resource

Adaptation, Mitigation

Population of Concern: A focus of content

Population of Concern: ☑

populations at particular risk or vulnerability to climate change impacts

Elderly

Resource Type: ☑

format or standard characteristic of resource

Policy/Opinion, Policy/Opinion

Resilience: ☑

capacity of an individual, community, or institution to dynamically and effectively respond or adapt to shifting climate impact circumstances while continuing to function

A focus of content

☑

Timescale:

time period studied

Time Scale Unspecified